Case 20-10823-elf Doc 54 Filed 10/09/20 Entered 10/09/20 08:13:38 Desc Main Document Page 1 of 3

Debtor 1	Shackarah	S.	Vera		
	First Name	Middle Name	Last Name	Che	eck if this is:
Debtor 2				_ M	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	— M	7 th differenced filling
United States Bank	cruptcy Court for the:	EASTERN DIST	OF PENNSYLVANIA	_ ㅁ	A supplement showing postpetition chapter 13 income as of the following date
Case number	20-10823				chapter 13 income as of the following date
(if known)					MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

i	ill in your employment nformation.		Debtor 1			Debtor 2 or no	on-filing spou	se
je	you have more than one ob, attach a separate page vith information about	Employment status	✓ Employed☐ Not employed		☐ Employed ☐ Not employed			
а	dditional employers.	Occupation	Teacher					
	nclude part-time, seasonal, r self-employed work.	Kipp Dubois Cha	arter Scl	nool				
	Occupation may include	Employer's address	5070 Parkside A	ve, STE	3500 D			
	tudent or homemaker, if it pplies.		Number Street			Number Street		
			Philadelphia	PA	19131			
			City	State	Zip Code	City	State	Zip Code

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Deptor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$6,933.33	
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	
4.	Calculate gross income. Add line 2 + line 3.	4.	\$6,933.33	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1 Shackarah S. Vera		Case nur	nber (if kr	nown) <u>20-1</u>	0823
			For Debtor 1		btor 2 or ing spouse	
	Copy line 4 here	4.	\$6,933.33			-
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,297.79			
	5b. Mandatory contributions for retirement plans	5b.	\$346.67			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$581.81			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify: See continuation sheet	_ 5h.•	\$272.57			
	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$2,498.84			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,434.49			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$1,000.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive			-		
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	— 8g.	\$0.00	-		
	h. Other monthly income.			•		
	Specify:	_ 8h. .	+ \$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,000.00			
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			+]:	\$5,434.49
	State all other regular contributions to the expenses that you list in Sinclude contributions from an unmarried partner, members of your house friends or relatives.			r roomma	ates, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts th	at are i	not available to pay	expenses	listed in Sch	edule J.
	Specify:				11. •	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11					\$5,434.49
	income. Write that amount on the Summary of Your Assets and Liabilitie if it applies.	es and	Certain Statistical In	ormation	,	Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	this fo	rm?			
	✓ No. ☐ Yes. Explain:					

Deb	tor 1	Shackarah S. Vera		Case nu	mber (if known)	20-10823
5h	Other	Payroll Deductions (details)		For Debtor 1	For Debtor 2 non-filing spo	
JII.		delphia Income Tax		\$268.41		
	PA SU	JI/SDI		\$4.16		
			Totals:	\$272.57		